

Medicaid Schools



http://www.doe.in.gov/achievement/individualized-learning/ school-based-medicaid



<u>Special</u> **Interests**

MEDUCAID NEWS

- First
- Understanding
- IEP

Check Out the Latest Editions Online!

Medicaid Billing Tool Kit: August 2012

Medicaid Billing Guide: July 2011

IEP Reimbursements Report: SFY12 as of 6/30/2012

Newsletter Search Tips and Fast Facts Locator:

See Medicaid in Schools Newsletter Archive

Learning Connection: IDOE Medicaid in Schools Community - your online connection to School-based Medicaid Announcements, Files & Bookmarks, Forum Discussions and an Events Calendar.

Coming Soon... Random Moment Time Study/RMTS User Guide plus a list of MAC Tools and **Resources for LEAs**

IndianaMAC Reimbursements Increased in Each of First Three Ouarters

IndianaMAC-participating Local Educational Agencies (LEAs) claimed federal funds totaling \$478,464 for the initial quarter (Oct-Dec 2011) of this new school-based Medicaid Administrative Claiming program. The total claim amount increased to \$645,422 in Quarter 2. Although not yet finalized, preliminary cost data and claim calculations for Quarter Three (Apr-June 2012) indicate participating LEAs will claim about \$825,000 in federal funding for activities routinely performed by school staff. The summer quarter claim (Jul-Sep) will be based on average results from the previous three.

Through IndianaMAC the federal government matches part of schools' costs for administrative activities that help students and families understand. apply for and access health care benefits. MAC activities include: arranging or participating in health fairs; assisting with completion or translation of Indiana health coverage programs applications; referring students for health services; collaborating with community partners to set up school-based or school-linked health services; arranging transportation to or translation related to health services; distributing Medicaid materials; attending or providing training related to medical services or the Mediprogram. E-mail mac@pcgus.com to learn more.

Newsletter SM2012-04

FALL 2012

Did you know?

- 137 Indiana school corporations claimed more than \$6.6 **million** in federal Medicaid reimbursements for IEP services in SFY 2012
- Indiana school corporations may participate in both Medicaid claiming for IEP Services & Medicaid Administrative Claiming
- Information on **Medicaid Waiver** changes effective 9-1-2012 is available at http:// www.in.gov/ fssa/2328.htm and http:// www.arcind.org/
- The Program Integrity Quick Link at indianamedicaid.com offers information on Medicaid Audits & Utilization Review

Medicaid Info for School Treasurers

The IDOE Medicaid in Schools Community on Learning Connection offers resources for School Financial Officers, Treasurers and accounting staff who have questions related to Medicaid reimbursements. Under this community's Files and Bookmarks Tab, click "Xtra Links for School District Treasurers" to access a link to the IDOE Office of School Financial Management's step-bystep video walkthrough of the IEP Services Reimbursement-related

Medicaid Adjustment to Tuition Support. In addition to Web site links, School Finance staff can view bulletins and documents such as "August 2012 Medicaid Adjustments," and Frequently Asked Questions about Medicaid Revenues, Match Rates and Funds Allocation." The site includes the CFDA # for the IndianaMAC program and a list of recent Federal Medicaid Match Rates for IEP Services. All are welcome to join this Community!

Medicaid Schools

Federal Medicaid Mandates Affect Indiana Schools



October seems to be the month for major Medicaid program changes. October 1, 2012 was Indiana's implementation date of a federal mandate requiring the National Provider Identified (NPI) number of the referring practitioner on claims for services that require a prescription, order or referral. Chapter 2 of the Medicaid Billing Tool Kit for IEP Services, 12th Edition, August 2012, includes details regarding this new requirement at Section 2.8.1.b. Additional information plus a directory of "Ordering, Prescribing and Referring Providers" are a mouse click away - at the "OPR Providers" Quick Link at www.indianamedicaid.com.

Implementation of another federally mandated Medicaid program change has been postponed until October of 2014. Adoption of the final regulation at 45 CFR Part 162, published September 5, 2012, moves implementation of the ICD-10 diagnosis code set (International Classification of Diseases, Tenth Revision) to 10/1/2014. For dates of services beginning October 1, 2014, all claims for medical services, including school claims for Medicaid-covered IEP services, must use the appropriate ICD -10 diagnosis code because all payers will no longer be allowed to process claims using the preceding version (ICD-9).

October 2012 may also be the month when many Medicaid-enrolled school corporations receive notification of the federally mandated Provider Enrollment Revalidation process that every state Medicaid agency is required to conduct for all providers. The IDOE Medicaid in Schools Community Learning Connection offers more information at the community Announcements Tab: read the announcement about "Medicaid Provider Enrollment Mandates Will Impact All Indiana School Corporations," posted on March 23, 2012. Additional details are accessible at the IDOE Medicaid in School Community's Files & Bookmarks Tab. Included in the "FAQ" folder is a document answering "Frequently Asked Questions about Indiana's School Medicaid Provider Enrollment Mandate".

Check out these and other resources available at the Medicaid in Schools Community on the IDOE Learning Connection. Everyone is welcome to become a member!



IEP Services and Medical Medical Necessity

Under what circumstances does Indiana Medicaid consider an IEP service to be "medically necessary" versus "strictly educational in nature"? There is no one-size fits all answer to this common question. However, the following example and Section 2.5.6. of the Medicaid

Billing Tool Kit can help.

Example of an IEP service that is strictly educational in nature: the student is suspected of having a learning disability and there is no reason to suspect the student's disability might be the result of (or has anything to

do with) an underlying mental health, behavioral or other medical condition. In cases where there is reason to suspect the student's learning disability could be related to such an underlying condition, a psych evaluation to rule out any such condition is considered medically necessary.

Understanding False Claim Act Staff Training Requirements



Applicable only if the school corporation receives \$5 million or more in TOTAL ANNUAL Medicaid reimbursements (combined reimbursements from Medicaid claim-

ing for IEP services and "MAC" or Medicaid Administrative activities), False Claims Acts require employee education about false claims recovery. See Medicaid Bill-

ing Tool Kit Section 10.3. for a detailed discussion and reference resources for additional information regarding requirements of State and Federal False Claims Acts.

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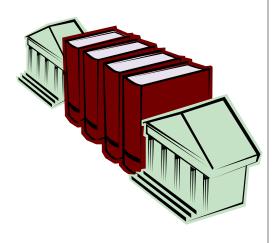
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The Indiana Department of Education provides technical assistance to Medicaid-participating public school corporations and charter schools. The Department also offers insight and information to schools interested in Medicaid claiming opportunities. Please visit the Department's Web site for free downloadable handbooks, brochures, form templates, slide presentations, reports, quarterly newsletters, and other resources. At left is a link to IDOE's School-based Medicaid Web page, along with contact information for IDOE staff who can answer questions and provide additional information about federal Medicaid matching funds available for school-based services and activities.

All are welcome to become members of the IDOE Medicaid in Schools Community on the Learning Connection. Contact your school corporation's Learning Connection administrator for access.



Conference Connections — Medicaid & Special Education

National Alliance for Medicaid in Education (NAME) — October 9-12, 2012 Providence, Rhode Island http://medicaidforeducation.org/ Indiana Council of Administrators of Special Education (ICASE) — February 20-22, 2013 http://www.icase.org/

Across the Nation

As part of its efforts to reduce costs and administrative burdens for Local Educational Agencies (LEAs) across the country while at the same time safeguard parental protections, the U.S. Department of Education proposed changes to the Part B regulation requiring LEAs to obtain a separate written parental consent "each time" they access student public benefits or insurance. In its Notice of Proposed Rulemaking, the U.S. DOE estimated net savings of \$14 million to \$40 million annually in the first year after the regulatory changes were adopted and about \$15 million to \$41 million annually thereafter. In place of requiring LEAs to obtain separate consent each time they bill, the change proposes a requirement to give parents "written notification about the circumstances in which the agency

may use public benefits or insurance to provide or pay for services under Part B of IDEA." In addition, the proposed change would require other notices to parents including one explaining the LEA's obligation per both FERPA and IDEA to obtain parental consent before disclosing a personally identifiable information to the public benefits or insurance program for billing purposes.

In his latest status update about this Part B regulation, John Hill, IDOE Special Education Specialist and Governmental Affairs Chair for the National Alliance for Medicaid in Education indicates the proposed change is currently under review by the U.S. Office of Management and Budget and is expected to become a final regulation by the end of this year.